PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10657458

01 4140 40 511 55 545								/	// (*/	<u> </u>	00	
		CLAIMS AS	S FILED - PART I (Column 1) (Co					SMALL ENTITY TYPE		OR	OTHER SMALL	
TOTAL CLAIMS			35					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			3 Smir	nus 20=	* 11			X\$ 9=		OR	X\$18=	770
INDEPENDENT CLAIMS			3 minus 3 = *				ı	X42=		OR	X84=	7.7.0
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				ł			JOH		
* If the difference in column 1 is less than zero, enter "0"						column 2		+140=		OR	+280=	
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	1021
		(Column 1)	(Column 2)			(Column 3)		SMALL ENTITY			OTHER SMALL	
AMENDMENT A		CLAIMS		HIGH					ADDI-	1 /		ADDI-
		REMAINING AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	I	X42=		OR	X84=	
L_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ľ	.140			.000	
	25,31							+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colun								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	ı	X42=		OR	X84=	
L_	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		ŀ	110				
							L	+140=		OR	+280=	
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
,		(Column 1)		(Colum	nn 2)	(Column 3)						
AMENDMENT C		CLAIMS		HIGH			Г		ADDI	•		400
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	T	X\$ 9=		OR	X\$18=	1 66
	Independent	*	Minus	***		=	ŀ	X42=		i	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		F	7,74-		OR	∧04= ————————————————————————————————————	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	ber Previously Pai	d For" (Total or	Independe	nt) is the	highest number t	foun	nd in the app	ropriate box	in coli	ımn 1	